

# ARIZONA DEPARTMENT OF WATER RESOURCES

3550 North Central Avenue, Phoenix, Arizona 85012

## NOTIFICATION OF LEASE OF ALL OR A PORTION OF A TYPE 2 NON-IRRIGATION GRANDFATHERED RIGHT

### INSTRUCTIONS

- Both the owner and the lessee must print name and sign this form.
- This form is for a lease of a Type 2 Grandfathered Right. If there is a change of ownership of the Type 2 Grandfathered Right, please contact the conveyance department at 602-771-8585.
- If a new certificate is requested, please provide the original certificate of Grandfathered Right. If the original certificate has been lost or destroyed, a notarized statement to this effect must be submitted, along with a \$35.00 certificate re-issue fee made payable to the Department of Water Resources.

AMA: ☐ Phoenix ☐ Pinal ☐ Prescott ☐ Santa Cruz ☐ Tucson

Notification of: ☐ Lease ☐ Sub-Lease

The undersigned parties hereby notify the Arizona Department of Water Resources of the lease of all or a portion of the following Certificate of Type 2 Non-Irrigation Grandfathered Right:

1. Certificate of Grandfathered Right Number: 58- \_\_\_\_\_.
2. Amount of right indicated on the Certificate: \_\_\_\_\_ acre-feet per annum.
3. Amount of right to be assigned to lessee: \_\_\_\_\_ acre-feet per annum.
4. Amount of right still available for leasing: \_\_\_\_\_ acre-feet per annum.
5. Duration of lease: from \_\_\_\_\_ to \_\_\_\_\_  
**month/day/year month/day/year**
6. Describe the lessee's intended non-irrigation use: \_\_\_\_\_
  - a. Is this right associated with an industrial facility (i.e. golf course, etc)? If so, please enter the name and/or ADWR facility number: \_\_\_\_\_
  - b. List other rights associated with the proposed use: \_\_\_\_\_
7. Well information  
Will the lease result in the temporary addition of one or more points of withdrawal from the wells currently listed on the above referenced Certificate of Grandfathered Right? \_\_\_\_Yes \_\_\_\_No

**OWNER**  
(Print or Type)

**LESSEE**  
(Print or Type)

NAME \_\_\_\_\_

NAME \_\_\_\_\_

Print Name \_\_\_\_\_

Print Name \_\_\_\_\_

COMPANY \_\_\_\_\_

COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

PHONE \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**If you have questions regarding this notification, please call your local Active Management Area office**

Phoenix: 602-771-8585 Pinal: 520-836-4857 Prescott: 520-778-7202 Tucson: 520-770-3800 Santa Cruz: 520-761-1814